

Dr. Jonathan R. Nebeker, M.D.

Dr. Nebeker joined the VA in 1998. He now leads clinical information management for the Veterans Health Administration (VHA). His degrees and training took place at Harvard and the University of Pennsylvania. He practices geriatrics at the Salt Lake City VA Medical Center.

Dr. Nebeker has led numerous innovative EHR and clinical-data projects at VA. In 2002, he was the first director of the informatics-focused Health Services Research and Development (HSR&D) center at the Salt Lake City VAMC. About the same time, he co-led informatics at the Salt Lake City VAMC in a role that would become the facility Chief Health Informatics Officer (CHIO). In 2008, he was the initial director of VA's national research-computing infrastructure called VINCI. Around 2010, he joined the operations side of VA Central Office. His initial duties focused on the VA-DoD Integrated EHR, for which he led the user interface design team including the Joint Longitudinal Viewer (JLV). In the mid 2010's he was the clinical lead for VistA Evolution and the functional architect of the enterprise Health Management Platform (eHMP). He also led the design of the user interface for that product, which enjoyed acclaim at its first 4 sites before the program was terminated in favor of EHRM. Dr. Nebeker was the initial CHIO for EHRM but left the program in October 2017. Since October 2022, he has been first the VHA lead for the safety focused Assess and Address period. Since April 2023, he has been the VHA co-executive sponsor of the EHR Modernization program. Since 2018 and prior to 2023, he has helped VA modernize its data systems and clinical-decision support systems, both of which interoperate with Oracle and VistA systems.

Dr. Nebeker has had a successful career in research and development. He has authored over 100 articles and has been principal investigator on many competitive federal grants for Health and Human Services and VA. His early-career focus was on epidemiology and electronic surveillance of adverse drug events and how the computer helps cause or prevent these harms. He subsequently turned to evidence based EHR user interface design. He has also led projects in clinical decision support. His innovations now focus on machine learning and artificial intelligence for human and electronic process control in support of a highly reliable, learning health system. Current projects mine electronic data to monitor actual implementation of clinical pathways and to monitor health IT systems for safe operation.